

# Children's Special Health Care Services Administrative Policy Manual

## Benefit – Limited Services Policy # C-2f



Title: Director,  
Children's Special Health Care Services (CSHCS)

**Latest Revision Date:** July 26, 2018

**Previous Title:** Provision of Orthodontia  
**Effective Date:** July 1, 1993  
**Revision Reason:** To enable fair, objective and consistent administration of Dental benefits related to an eligible medical condition.

**Title:** Dental Services  
[Dental Services Procedure](#)

**Purpose:** To describe the dental care benefit to be provided in the Limited Services included in the Health Care Service Package. This benefit is a combination of Basic Dental Services & other dental procedures to include Orthodontia. This benefit, like the others is contingent upon the availability of program funding.

**Rule References:**

410 IAC 3.2-1-10 – “Dental care” defined  
410 IAC 3.2-7-1 – Health care delivery system  
410 IAC 3.2-7-3 – Limited health care services included in the health care services package  
410 IAC 3.2-7-3(b)(6) – Dental services.

**Policy:** Orthodontia, Basic Dental Care & other dental procedures will be provided when treating participants with a significant congenital or acquired developmental craniofacial anomaly related to the participant's eligible medical condition.

**Exclusions:** Malocclusions of the conventional angle [ Classes I-III ] are not considered a significant congenital craniofacial anomaly.

Orthodontia is not considered an effective standard treatment for Temporomandibular Joint (TMJ) dysfunction and therefore will not be authorized for that condition.